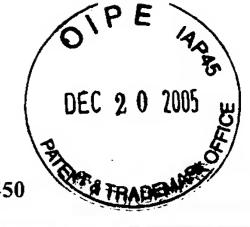


## PART B - FEE(S) TRANSMITTAL



Complete and send this form, together with applicable fee(s), to: Mail

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CURRENT CORRESPONDENCE	CE ADDRESS (Note: Use Block 1 for	r any change of address)		ļ	Note: A certificate of	f mailing can only be used f	or domestic mailings of th	
22850 7.	590 09/26/2005	IUMBER		1	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.  Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
CU	STOMER 1							
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	22850	•					(Signature)	
							(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED IN		OR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/647,335	10/647,335 08/26/2003		Frieder Borgmeier		241974US0	3547		
TITLE OF INVENTION: P	REPARATION OF A MUL	TIMETAL OXIDE	E MATERIAL					
/21/2005 MBEYENE2 0000	0050 10647335							
FC:1501	1400.00 UP							
FC:150APPLN, TYPE	SMALL BALLON OF	ISSUE F	EE	PUI	BLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	nonprovisional NO		\$300		\$1700	12/27/2005		
EXAM	EXAMINER		ART UNIT		ASS-SUBCLASS			
JOHNSON, CHRISTINA ANN		1725	1725		502-304000			
1. Change of correspondence address or indication of "Fee Address" (37			2. For printing on the patent front page, list OBLON, SPIVAK,					
CFR 1.363).  Change of correspondence address (or Change of Corresponder			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,					
Address form PTO/SB/122) attached.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
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3. ASSIGNEE NAME ANI	RESIDENCE DATA TO E	BE PRINTED ON T	THE PATENT	(print or	type)			
PLEASE NOTE: Unless recordation as set forth in	s an assignee is identified by 37 CFR 3.11. Completion	elow, no assignee of this form is NO	data will appe T a substitute fo	ar on th or filing	e patent. If an assignan assignment.	nee is identified below, the o	locument has been filed fo	
(A) NAME OF ASSIGN	) RESIDENCE: (CITY and STATE OR COUNTRY)							
BASF Aktier	ngesellschaft		Ludwigs	shafe	n, GERMANY			
Please check the appropriate	e assignee category or category	ories (will not be pr	rinted on the pa	tent) :	☐ Individual	Corporation or other private gr	oup entity Government	
4a. The following fee(s) are	enclosed:	. 4b	b. Payment of F	• ,	. 64 6 ():			
Issue Fee	small entity discount permitt	ad)			ount of the fee(s) is en			
Advance Order - # o	Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 15-0030 (enclose an extra copy of this form).							
Advance Order • # 0	f Copies		Deposit Accor	unt Nun	iber 15-0030	(enclose an extra c	copy of this form).	
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NOTE: The Issue Fee and F	is requested to apply the Iss Publication Fee (if required) ords of the United States Pat	will not be accepted	d from anyone	) or to rother that	e-apply any previous an the applicant; a reg	ly paid issue fee to the applications is the state of the	ation identified above. he assignee or other party in	
Authorized Signature	Raymond F. C	andillo	h.		Date	DEC 2 0 20	05	
Typed or printed name Raymond F. Cardillo, Jr.					Registration	No. Reg. No. 40	.440	

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